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BEING A

Précis or Digest

OF

EVIDENCE

TAKEN, *VIVA VOCE* (1871), BEFORE A COMMITTEE

OF THE

HOUSE OF COMMONS,

(ON THE VACCINATION ACT, 1867.)

BY

T. BAKER, Esq.,

OF THE INNER TEMPLE, BARRISTER-AT-LAW,
SECRETARY TO THE LATE ROYAL COMMISSION ON THE SANITARY STATE OF THE ARMY IN INDIA
(1859-63), AND WRITER OF THE PRÉCIS PRESENTED TO PARLIAMENT OF
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AUTHOR OF "THE LAWS RELATING TO PUBLIC HEALTH," "BURIALS," ETC. ETC.

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VACCINE AND VACCINATION: OBSERVATIONS AND BACTERIOLOGICAL INVESTIGATIONS.

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HOW LEICESTER DEALS WITH SMALLPOX.

Reprinted from "THE VACCINATION INQUIRER," *November 1st*, 1892.

THE marvellous success which for the past twenty years has attended the efforts of the sanitary authorities at Leicester in stamping out smallpox without recourse to vaccination, is now universally known and admitted. What is known as the "Leicester method" is now adopted and practised by almost all sanitary authorities everywhere, whether they do or do not profess to believe in the efficacy of vaccination.

But from the original "model" there has been considerable departure by would-be imitators. That which in Leicester has become part of the life of a free people, has, in many other places, in the hands of irresponsible authorities guided by medical interference and prejudice, become an engine of despotic power.

THE MISREPRESENTATION.

From time to time there have been bitter complaints of the high-handed proceedings of various authorities so influenced, and of the outrageous manner in which they have overstepped the bounds of the law, when dealing with outbreaks of smallpox. Inquiries have recently been addressed to me from many quarters all over the world, asking for precise information as to the actual method practised in Leicester in stamping out this disease. And the necessity for reliable information has been emphasized by the fact that in other places various systems of tyranny are carried out under the plea, "That is how they do it at Leicester."

But it will be an easy task for me, having acquired on the spot a perfect acquaintance with the subject from the very beginning, to show that such assertions have no foundation whatever in fact.

ORIGIN OF THE MISREPRESENTATION.

Let us notice in the first place what may have given rise to these mischievous innuendoes of our opponents. Probably the first link in the chain is to be found in the report of the Leicester Medical Officer of Health for the year 1884, in a paragraph which reads as follows:—

> During the last eight years there have been no fewer than twenty importations of smallpox into the town and its immediate neighbourhood; the disease has always been stamped out, owing to the fact that the Health Committee have always succeeded in promptly removing to hospital, not only those stricken with the malady, but also all the other inmates of each infected house.

The closing words of this paragraph have possibly led to the belief that as all inmates of infected houses are said to have gone into quarantine, they did so, *nolens volens*, under compulsion. They certainly were not *forced* into quarantine, and it is equally certain some have declined to go, as I shall soon proceed to show.

The next link, perhaps, appears in an article on "Leicester and its Immunity from Smallpox," written by a "Special Commissioner," appointed by a leading medical journal, the *Lancet*. This appeared in its issue of June 5th, 1886. Amongst a great deal of rhodomontade about

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EXTRACTS

FROM

OUR MEDICINE MEN

AND

FASHIONS OF THE DAY

IN MEDICINE AND SCIENCE.

BY HENRY STRICKLAND CONSTABLE.

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VACCINATION

A

CURSE.

"Every good tree bringeth forth good fruit; but a corrupt tree bringeth forth evil fruit." Matthew VII, 17th.

C. W. Amerige, M. D.

Price, 10 cents.

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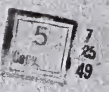

Supreme Court of Indiana.

FRANK D. BLUE, *Appellant*,

v.

FANNIE M. BEACH and ORVILLE E. CONNER, *Appellees.*

No. 18004.

APPEAL FROM VIGO CIRCUIT COURT.

Brief for Appellees.

Can school children who refuse to be vaccinated during an epidemic of small-pox be excluded from the public schools?

W. A. KETCHAM,
Attorney-General.

MERRILL MOORES,
Of Counsel for the State.

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AS TO VACCINATION AND SMALLPOX

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SUPPLEMENT TO

"A VACCINATION CREED"

NOT one of the 346 cases of smallpox discovered in Chicago within the last three years was found vaccinated as defined in the VACCINATION CREED.

Of the total number, 306 never had been vaccinated at all, though most of them claimed that they had. Examination of the arms proved that these attempts at vaccination were failures; there was no scar and the patients finally admitted that the vaccinations when performed did not "take." A "failure" is not a vaccination; therefore, these 306 cases had never been vaccinated.

Of the remaining 40 cases, 26 had old, irregular and doubtful scars said to be the result of vaccination; but these were not characteristic; they were more like the scars from infected sores or wounds than those from vaccine. Nine had fair old scars of vaccinations made from 30 to 40 years previously. Only five had typical (characteristic) scars; but these also were the results of vaccination made many years before and never repeated.

In no single case of the 346 had the terms of the First Article of the VACCINATION CREED been complied with — vaccination had NOT been repeated until it would no longer "take." If it had been they could not have contracted smallpox.

These 346 persons are examples of thousands of others who honestly believe they have been vaccinated, because they have had their arms scratched, something rubbed in and a more or less painful sore has resulted. There is no operation so simple and so safe as vaccination when properly performed and cared for. There is no operation in which such serious results follow carelessness and ignorance — even unto death itself, either as a direct result through poisoning of the vaccination sore or from smallpox through failure to secure a successful protective vaccination.

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THE DECLINE IN SMALLPOX

WHICH PRECEDED THE INTRODUCTION AND ACCOMPANIED THE ADOPTION OF VACCINATION—TO WHAT WAS IT DUE?

BY

J. W. HODGE, M. D.,

NIAGARA FALLS, N. Y.

Reprinted from THE MEDICAL VISITOR, of Chicago, for June, 1908.

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TREASURY DEPARTMENT.
Public Health and Marine-Hospital Service of the United States.
WALTER WYMAN, Surgeon-General.

HYGIENIC LABORATORY.—BULLETIN No. 30.
M. J. ROSENAU, Director.
August, 1906.

I.—MATERNAL TRANSMISSION OF IMMUNITY TO DIPHTHERIA TOXINE.

II.—MATERNAL TRANSMISSION OF IMMUNITY TO DIPHTHERIA TOXINE AND HYPERSUSCEPTIBILITY TO HORSE SERUM IN THE SAME ANIMAL.

BY

JOHN F. ANDERSON.

WASHINGTON:
GOVERNMENT PRINTING OFFICE.
1906.

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Is the Theory of Jennerian Vaccination Founded on Fictions and Fallacies?

By J. W. HODGE, M. D., Niagara Falls, N. Y.

Reprinted from the November MEDICAL ADVANCE.

1907

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*THE FAILURE OF VACCINATION TO PROTECT FROM SMALLPOX IN RE-VACCINATED JAPAN

BY J. W. HODGE, M. D., NIAGARA FALLS, N. Y.

Japan is one of the most completely vaccinated and re-vaccinated nations in the world. In the year 1872, a law was passed making vaccination in that country compulsory. Notwithstanding the rigid enforcement of that law, Japan subsequently suffered many thousands of deaths annually from smallpox following "successful" vaccination.

Pro-vaccinists, far from being dismayed at this death-roll, insisted that it might have been avoided if every individual, instead of having been but once vaccinated, had been re-vaccinated.

The legislative Chamber, therefore, in the year 1885 passed another and a more stringent law whereby re-vaccination, repeated every five to seven years, was made compulsory. In pursuance of this law, 25, 474,370 vaccinations, re-vaccinations and re-re-vaccinations were officially recorded as having been performed in Japan between the years 1886 and 1892, which means that about two-thirds of the entire Japanese population already well vaccinated under the provisions of the law of 1872, were re-vaccinated within the period above stated. It does not seem possible that the most ardent pro-vaccinist could desire more than this. What was the result of this enormous amount of re-vaccination? The official government records show that during the seven years which intervened between 1886 and 1892 Japan suffered 38,979 deaths from post-vaccinal small-pox, while 156,175 cases of vaccinated small-pox were officially notified.

This was a case-fatality of nearly twenty-five per cent. which greatly exceeds the small-pox death rate of the pre-vaccination epoch when nobody was vaccinated. By the provisions of the compulsory law, every infant born in the Empire of Japan must be vaccinated within the first year after its birth. In case the result of the primary vaccination proves to be unsatisfactory, the vaccine operation must be followed by three additional vaccinations within the year.

Even if the result of the primary vaccination proves "successful" and entirely satisfactory, vaccination must be repeated after a period of from five to seven years thereafter.

In the event of an outbreak of smallpox the Japanese authorities rigidly enforce general re-vaccination irrespective of previous vaccinations and re-vaccinations. In spite of these stringent requirements in respect to re-vaccination and re-re-vaccination of the entire Japanese population, what has been the result? Let the official government statistics bear testimony During the sextennial period (1892-1897) Japan had 142,032 cases of post-vaccinal small-pox notified, 39,535 of which cases proved fatal. In a single year (1893) 41,898 cases of smallpox were officially notified, 1,852 of which cases proved fatal.

By another act of Parliament passed in 1896, and at once signed by the Mikado, re-vaccination repeated at the end of every five year period was made compulsory upon every Japanese subject, whatever his or her station in life. This act, like its predecessors, was rigidly enforced under a severe penalty. What was the result? Nearly 42,000 cases of small-pox in the Empire were notified during the very next succeeding year.

In the single year 1897 the Japanese nation had 41,946 cases of small-pox officially notified, of which 12,276 terminated fatally. This was a case-fatality of about thirty-two per cent. or nearly double the fatality rate for small-pox in the pre-Jennerian era when nobody was vaccinated and at a time when people lived in filth and in ignorance of the laws of health.

Does this showing indicate that vaccination or re-vaccination had any effect either in preventing or in mitigating small-pox? According to recent official government reports received by the writer direct from Tokio, Japan has had 171,611 cases of smallpox and 47,919 deaths from that disease during the last two decades (1889 to 1908.) During the year 1908 Japan again suffered severely from small-pox, having experienced the worst epidemic of recent times. From S. Kubota, Director of the Sanitary Bureau of the Empire of Japan, I received by personal letter the official statement that "the number of cases of small-pox officially notified in Japan for the year 1908 was 18,367, while the number of officially recorded deaths from the same disease during the same year was 5,837." This was a case-fatality of more than 32 per cent. It would be interesting to ascertain to what extent the variolous disease was mitigated by vaccination in these 5,837 fatal cases of post-vaccinal small-pox. Perhaps some obliging apologist for vaccination who is versed in the mysteries of Jennerism will be kind enough to tell us.

This is the true state of affairs in a country in which compulsory vaccination and re-vaccination, repeated every five years, has been rigidly imposed upon the entire Japanese population since the year 1885, and in which smallpox is alleged by the Jenner-bigots to be non-existent. In the presence of such convincing proof of the utter uselessness and worse than uselessness of vaccination as a preventive of small-pox, where is the sane person who can retain belief in the alleged efficacy of

*(Reprinted from the September, 1910, Number of Twentieth Century Magazine.)

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Cupidity, Invincible Ignorance and Credulity, the Bases of Professional Faith in Vaccination*

BY J. W. HODGE, M. D., NIAGARA FALLS, NEW YORK

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FOREWORD

Vaccination is a barbaric rite of superstitious origin, inherited from our ignorant forebears of a pre-scientific age. So-called "vaccine lymph" is a quack-nostrum of inscrutable varieties and of unknown composition, except that it is known to contain an indefinite mixture of the poisonous infective products of the undefined diseases of man and beast. The doctor who vaccinates enacts the role of the veriest mountebank, in that he prescribes and dispenses this dangerous nostrum without knowing what it is, who may need it, or what effect it will have upon its victim. In the Jennerian era the average doctor of medicine, of whom Jenner was a very ordinary specimen, knew nothing of hygiene and little of medicine, while the average layman of that period knew nothing of either hygiene or medicine, the latter of which he regarded as a sort of mystery.

In accordance with the prevailing custom of that time, everybody who was taken sick imagined that he must call in a doctor, swallow drastic drugs and be bled to insensibility. The patient just closed his reason, opened his mouth after the fashion of an unfledged birdling and implicitly swallowed the drastic dose of physic. If he died, his "taking off" was simply a dispensation of Divine Providence. If he fortunately happened to "pull through" in spite of the poisonous dosage and the depleting lancet, his recovery was hailed as an unmistakable and brilliant achievement of "scientific" medicine and a grand triumph of medical skill and acumen on the part of his attending physician. Since that time a century has rolled by, the dark mists of ignorance and superstition have been clearing away. People have learned to observe, to reason and to think. To-day the average intelligent man has his eyes and his reason open before he opens his mouth. He asks the doctor what he is giving him, why he gives it, and what effect he expects it to have. The average intelligent man of to-day has a mind and an opinion of his own. The days of mysticism and mystery in medicine are passing away, and professional authority is fast losing its grip upon the public mind. People nowadays are beginning to investigate, think and conclude for themselves. They are, at least, called upon to decide between the conflicting creeds of the different schools of medicine; and in order to intelligently decide, they must examine both sides, and, having examined both sides, they become entitled to an unquestionable right to an independent opinion of their own in matters medical, as in all other matters. If the doctors cannot agree with each other, the people surely have a right to disagree with the doctors.

After I had been forced by the stern logic of facts to surrender my faith in the Jennerian doctrine and began to write against vaccination, in the year 1883, I was regarded by my medical confreres as a medical heretic and was denounced as a fit subject for the services of an alienist.

I was gravely told by my professional colleagues that I might as well doubt the existence of the attraction of gravitation or the revolution of the earth on its axis as to doubt the efficacy of preventive vaccination.

These medical dogmatists declared that the efficacy of the Jennerian antidote for smallpox was a scientific fact as firmly established as is the attraction of gravitation, and that to question the former was quite as preposterous as to doubt the existence of the latter.

All this gratuitous advice tendered by my professional colleagues had but little effect upon me for the reason that I had demonstrated to my complete satisfaction the utter inefficacy of vaccination as an anti-variolous measure. While officiating in the capacity of public vaccinator during an epidemic of smallpox in the city of Lockport, N. Y., in the year 1882, I personally vaccinated thousands of people with "pure" virus and good "takes" only to see scores of these "successfully" vaccinated and presumably well protected subjects come down with confluent smallpox only a few weeks after their "successful" vaccinations.

That gruesome experience utterly destroyed every particle of my long cherished faith in Dr. Jenner's quack-nostrum.

Since that time there has been a great revolution in the opinions of medical men and laymen in reference to protective vaccination. Thousands of physicians who were at that time ardent adherents of the Jennerian doctrine have since abandoned all faith in the Jennerian operation and are emphatic in their expressions of denunciation of Dr. Jenner and his great "discovery."

Distinguished scientists and philosophers, like Dr. Alfred Russel Wallace and Herbert Spencer, have investigated the practice of vaccination, only to denounce it *in toto* by characterizing it as a "gigantic delusion," a "disastrous delusion," and a "grotesque superstition." To-day vaccination stands condemned by the two most distinguished scientists and philosophers of modern times.

No man of science, who in modern times has investigated the subject of vaccination without having pecuniary or vested interests therein, has sanctioned the practice of this empirical art. On the contrary, every scientific investigator, who has turned his attention to the Jennerian practice, has thereafter disclaimed all belief in the alleged efficacy of vaccination as a prophylactic against smallpox. In consequence of the findings of these scientists I find now myself in the best of company.

*Reprinted from *The Herald of Health* for January, 1911.

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VACCINATION PROS AND CONS

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A REPLY

to Dr. Monckton Copeman's
ARTICLE ON "VACCINATION"
in the 11th Edition of
"The Encyclopædia Britannica."

BY

THE EDITOR OF "THE VACCINATION INQUIRER"
(*The Organ of the National Anti-Vaccination League*).

PRICE 2d. POST FREE 2½d.

PUBLISHED BY THE
PEOPLE'S LEAGUE OF MEDICAL FREEDOM,
104 BISPHAM ROAD, SOUTHPORT.
1912.

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Vaccines and Serums Viewed from the Standpoint of Many Physicians

"The layman becomes skeptical about the trustworthiness of the pronouncements of science in general, and in this respect the average medical practitioner joins his ranks. The lay press spreads the errors, especially when they carry the endorsement of a prominent name, but it never retracts; and the public pays rich royalties into the pockets of those who know how to exploit an opportunity to promote health."

Editorial, *The Journal of the American Medical Association*, January 18, 1913.

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PUBLISHED OCTOBER 1919

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THE CRIME OF VACCINATION!!

BY

TENISON DEANE, M. D.

SAN FRANCISCO, CAL.

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Many thousand copies of the earlier edition of this pamphlet have been issued. Criticism and correction have been challenged. Not one statement in it has been disproved.

National Liberal Club

Political and Economic Circle.

Transactions: *Vol. V., Part XIII.*

New Edition and with additions, including the Law of 1907, and Statistics as recent as could be obtained in June, 1914.

* * * * * * * * * * *

Vaccination and the State.

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Introduced by ARNOLD LUPTON, M.P.

Chairman:
CHARLES CREIGHTON, M.D.

* * * * * * * * * * *

For further information refer to
THE NATIONAL ANTI-VACCINATION LEAGUE,
27, SOUTHAMPTON STREET, STRAND,
LONDON, W.C.

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THE

SYDNEY SMALLPOX OUTBREAK

IN 1913.

By

Miss L. LOAT

Secretary, National Anti-Vaccination League.

READ AT THE ROME CONGRESS

April 15th to 17th, 1914.

The National Anti-Vaccination League,
27, Southampton Street, Strand,
London, W.C.

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Dangers in the Use of Vaccines and Serums

BY
HARRY B. ANDERSON
Secretary, The National League for Medical Freedom
Editor, MEDICAL FREEDOM

(Reprint from MEDICAL FREEDOM, February, 1916—August, 1916)

THE NATIONAL LEAGUE FOR MEDICAL FREEDOM
332 South Michigan Avenue - Chicago, Ill.

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TREASURY DEPARTMENT

Public Health and Marine-Hospital Service of the United States

PUBLIC HEALTH BULLETIN No. 52

August, 1919

VACCINATION

AN ANALYSIS OF THE LAWS AND REGULATIONS RELATING THERETO IN FORCE IN THE UNITED STATES

BY

J. W. KERR

Assistant Surgeon General

PREPARED BY DIRECTION OF THE SURGEON GENERAL

WASHINGTON
GOVERNMENT PRINTING OFFICE
1919

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VACCINE THERAPY—THE MOST RATIONAL AND EFFECTIVE METHOD OF TREATING WHOOPING COUGH

ADDITIONAL OBSERVATIONS

By Charles James Bloom, M.D., B.Sc.

Assistant Professor of Pediatrics, Post-Graduate College of Medicine; Instructor, Department of Pediatrics, College of Medicine, The Tulane University of Louisiana; Senior Pediatrist, Lying-In Hospital; Junior Pediatrist, Touro Infirmary; Visiting Pediatrist, Charity Hospital, New Orleans, Louisiana

Reprinted from
ARCHIVES OF PEDIATRICS
Vol. XXXVI No. 1, January, 1919

Medical science, as a collective unit, has made a continuous progress during the last score and ten years. Epidemics, that were prone to act so destructively; clinical entities that were thought etiologically to have been unknown quantities have gradually sought the kingdom of oblivion. Persevering and painstaking bacteriologists have discovered by arduous labors and concentrated efforts, the goals of their endeavors. Specific bac-

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HORRORS
OF
VACCINATION

EXPOSED AND ILLUSTRATED

PETITION TO THE PRESIDENT TO ABOLISH COMPULSORY VACCINATION IN THE ARMY AND NAVY

BY
CHAS. M. HIGGINS

CITIZENS' COMMITTEE
Opposing Compulsory Vaccination
11 Beacon Street,
Boston, Mass.
Room 331

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American Medical Liberty League
59 E. VAN BUREN ST.
CHICAGO

LEGAL WARNING
TO
Vaccinators, Doctors and Health Officers

FALSE QUARANTINE AND COERCIVE VACCINATION CONDEMNED BY THE HIGHEST COURT IN THE STATE OF NEW YORK

Extracts from Decision of Court of Appeals, State of New York, in Case of William H. Smith against Health Commissioner Emery, of Brooklyn, N. Y., in 1894.

"But I find no warrant for the rather extraordinary declaration of the Commissioner that **'wherever any person shall refuse to be vaccinated such person shall be immediately quarantined and continue in quarantine until he consents to such vaccination.'** * * * It is difficult to suppose that the Legislature would invest local officials with such arbitrary authority over their fellow citizens and the language of an act would have to be very plain before the court would be warranted in giving it such a construction. But the Legislature has done nothing of the kind. * * * it is very clear that an 'isolation of all persons and things' is only permitted when they are **'infected with or exposed to'** contagious and infectious diseases. * * * the authority is not given to direct, or to carry out, a quarantine of all persons who refuse to permit themselves to be vaccinated and it cannot be implied."

It will thus be seen from the above quotation that the highest court in the State of New York emphatically condemns all coercive vaccination and all false quarantine of healthy and uninfected persons who will not submit to being vaccinated against their will and consent.

This dastardly act of coercive vaccination and false quarantine is, therefore, not only illegal under decisions of our highest courts, but is an act of gross medical malpractice which is

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Copy of letter addressed to Sir George Newman, Chief Medical Officer to the Ministry of Health.

The National Anti-Vaccination League.

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Secretary :
Miss L. LOAT.

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Mr. H. B. KNIGHT CHORLEY. Mr. ARNOLD LUPTON.
Mr. E. B. McCORMICK.

(OFFICE FOR COMMUNICATIONS FOR "THE VACCINATION INQUIRER.")

TELEPHONE NO. VICTORIA 3818.

Offices : 25, DENISON HOUSE,
296, VAUXHALL BRIDGE ROAD,
WESTMINSTER, S.W.1.
Close to Victoria Station.

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January 6th, 1921.

SIR,

I am directed by the Council of the National Anti-Vaccination League to draw your attention to the following representations in regard to the paragraphs on vaccination contained in your first Annual Report as Chief Medical Officer of the newly-established Ministry of Health.

Although you avow your faith in vaccination, we cannot help but be favourably impressed by the relatively small amount of space which you give to the subject as compared with the large space devoted to it in the Annual Reports (especially the earlier Annual Reports) of your predecessors in office. We trust that this may be regarded as an indication that you will be fair-minded enough to look at the question from all sides, and to give due weight to the views of those who have, for nearly three-quarters of a century, in the face of the fiercest legal and extra-legal persecution of modern times, steadily and strenuously opposed the public endowment and enforcement of an operation which has been defined by one of your own staff as "consisting in the intentional transference to the human being of the eruptive disease of cattle called cowpox (vaccinia)." (Dr. S. Monckton Copeman, Article "Vaccination," 11th Ed Enc. Brit.)

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THE MASONIC OBSERVER

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Vol. 23 MINNEAPOLIS, MINNESOTA, SATURDAY, DECEMBER 10, 1921. No. 15

Philippines Has Terrible Epidemic of Smallpox

The United States Public Health Service has boasted for years of the wonderful record made in clearing up smallpox in the Philippines by vaccination, but for the past two years little has been heard along this line and the reasons for this silence are now coming to light.

Millions of vaccine points have been shipped to the Philippines, and have been used there ever since 1910 and yet in 1918 these Islands experienced one of the most appalling epidemics of smallpox ever known, with an almost unheard of percentage of deaths in proportion to the cases.

In Manila alone One Thousand Three Hundred Twenty-six cases were reported during the year, and of this number Eight Hundred Sixty-nine died. (See "report of the Philippine Health Service for 1918," page 62.) Bear in mind that Manila was, and still is, one of the most thoroughly vaccinated cities, in proportion to its population, of all cities in the Philippines, probably as thoroughly vaccinated as any city in the known world. The claim is made that "pupils of the public and private schools; officers and employees of the government—wherever the annual systematic vaccination has been **thoroughly** and **accurately** performed proved **quite well protected against smallpox.**" This claim is entirely unsupported by statistics and it is the same old excuse that is always made when vaccination fails to protect the vaccinated, as it always has to date, that if you are vaccinated and get the smallpox you were not "successfully" vaccinated. If you are vaccinated and don't get smallpox your vaccination "took" and was "successful."

In all FORTY-SEVEN THOUSAND, THREE HUNDRED SIXTY-NINE CASES OF SMALLPOX, with a total of SIXTEEN THOUSAND FOUR HUNDRED FORTY-SEVEN DEATHS were reported in the Philippines during the year 1918. The HIGHEST percentage of mortality, 65.3 per cent, was in Manila, the most thoroughly vaccinated place in the islands, the LOWEST percentage of mortality, 11.4 per cent, was in Mindanao where, owing to religious prejudices of the inhabitants, vaccination had not been practiced as much as in most other parts of the Islands. To the everlasting shame of the misnamed "health" service vaccination has been, largely forced on Mindanao since 1918 in the face of this direct proof that their people were safer without it, and with the result of a smallpox mortality increase to above 25 per cent in 1920.

In view of the fact that Sanitary Engineers had probably done more in Manila to clean up the city and make it healthy than in any other part of the Islands, there is every reason to believe that excessive vaccination actually brought on the smallpox epidemic in spite of the sanitary measures taken to promote health.

It is also highly significant that the statistics of the Philippine health service show that there has been a steady increase in recent years in the number of preventable diseases, especially typhoid, malaria, beriberi and tuberculosis. Is it reasonable to believe that the very thorough campaign of vaccination and serum inoculations of various kinds is responsible in at least some degree for this? You can answer the question for yourself.

Even the most casual reading of reports of the Philippine Health Service, covering the years from 1910 to 1920, inclusive, prove conclusively that the medical doctors of the service are regularly using the Filipinos as guinea pigs to experiment with any kind of vaccines or serums they take a notion to try out. The United States has beyond question done wonders for the Filipinos along educational lines and, probably, in establishing the Islands on a sound financial basis, but there is every reason to believe that the "health" service has been a shameful, disgraceful failure, even when judged by their own reports.

The great smallpox epidemics experienced in highly vaccinated Germany and Japan have now been duplicated in the Philippines. How much longer will reputable physicians continue to stand sponsor for the shameful delusion that "Vaccination is a harmless method of immunizing against smallpox."

It is not surprising that many honest, conscientious medical men still believe in the merits of smallpox vaccination, because the truth about its dangers is carefully kept from them by those who should inform them. Neither is it surprising that some doctors who do know the truth refuse to come out openly and condemn the practice. Once the medical profession frankly admits that vaccination is a complete failure, and they will have to do it, the bottom falls out of the whole vaccine and serum thicry. They are verily "In with the Devil and the deep sea."

The medically controlled Navy and War Department of the United States still continues to offset sanitary measures taken for the protection of our soldiers and sailors and to lessen their

Taken from Dec. 17 Issue

60,612 Cases of Smallpox, 43,294 Deaths From Smallpox in the Philippines in 1919

Last week The Masonic Observer printed the truth about the appalling epidemic of smallpox in the Philippines in 1918, with its record of 47,369 cases and 16,447 deaths. See page 8, Report of the Philippine Health Service for 1918.

We were unable to secure a 1919 report of the Philippine Health Service, and this is not surprising in view of a discovery made in the report of that organization for 1920, tucked away in one small paragraph on page 24 of the report, which discloses that the smallpox epidemic of 1918 continued during 1919 with a total of 60,612 additional cases and 43,294 deaths for 1919.

Think of it—less than 11,000,000 population in the Philippines and 107,981 cases of smallpox with the awful toll of 59,741 deaths in 1918 and 1919, and bear in mind that, in all human probability, the inhabitants of the Philippines are as thoroughly vaccinated and re-vaccinated as any people in the world.

Systematic vaccination started in the Philippines in 1905 and has continued ever since. It is certain that over Ten million vaccinations for smallpox were performed in the Philippines from 1905 to 1917, inclusive, and very probable that the vaccinations numbered even as many as Fifteen Million during that time. This can be verified by reference to reports of the Philippine Health Service.

With the record of this greatest epidemic of smallpox in recent years confronting the Philippine Health Service, is it any wonder that their 1918 report contains such statements as the following:

"Two difficulties were encountered in vaccination: (1) Insufficiency and unsatisfactory kind of vaccine virus and (2) the natural disinclination of the people to be vaccinated and ever actual opposition by the Mohammedans. Among the latter, the health service was often placed in a very unfavorable position. After preaching the efficacy of vaccination against smallpox they allowed themselves to be vaccinated. With the virus supplied, **the vaccination did not prevent or attenuate the smallpox epidemic. They even suspected that the vaccination brought on the epidemic.**" See page 211.

"Since 1917 general vaccination work was carried on throughout the province. The failure of 3 succeeding vaccinations among the non-Christians detracted faith from this efficient prevention and it also disposed them to hate the health personnel.' See page 215.

The Philippine police force was used to compel parents to submit their children to the vaccination. These little ones ranged from babies in arms to 10 years of age. Report for 1918, page 123.

In spite of the terrible lessons of preceding years, which should have proved conclusively to the Philippine Health Service the worthlessness and probable disease breeding nature of vaccination, almost Ten Million additional vaccinations were performed under their direction during the three years 1918 to 1920, inclusive, and besides this serum squads have been for years and are still touring the Filipinos with "anti-cholera and anti-typhoid" inoculations and laying the foundation for other death dealing epidemics, as witness General Leonard Wood's 1921 report on the Philippines, only lately off the press, which bluntly states that "there has been a steady increase in recent years in preventable diseases, especially typhoid, malaria, beriberi and tuberculosis." See page 31. Why he ignores the disgraceful, shameful, all but criminal conditions disclosed relative to smallpox is hard to understand.

Get copies of the U. S. Philippine Health Service reports. Your blood will boil as you read them and learn of the "medical" experiments that have been inflicted on the Filipinos in the name of "health," and then will chill with horror at the result of these experiments to which they have been subjected.

Do you want these conditions repeated in the United States? Political medical doctors are fighting for compulsory use of vaccination and serums here. The issue is before you to decide

Taken from Jan. 14 Issue

Medical Vaccinators in Control of Government Health Activities in the Philippines Attempt Explanation of Conditions Exposed by The Masonic Observer

Two Philippine smallpox editorials which appeared in The Masonic Observer, giving details of the 1918-1919 smallpox epidemic in these systematically vaccinated islands, with the resulting official record of 107,981 cases and the terrible toll of

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TREASURY DEPARTMENT

PUBLIC HEALTH REPORTS

ISSUED WEEKLY
BY THE UNITED STATES
PUBLIC HEALTH SERVICE

VOLUME 37 :: :: NUMBER 51

DECEMBER 22 - 1922

SPECIAL ARTICLES

Abnormal Vaccinia in Lepers
Smallpox and Vaccination in Denver, Colo.
Regulations Governing the Care of Lepers

WASHINGTON
GOVERNMENT PRINTING OFFICE
1922

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SMALLPOX INCREASED

SINCE the winter number of the METROPOLITAN Magazine, reports from various parts of the United States and Canada show that a serious and alarming situation still exists with respect to Smallpox. The vaccination of every man, woman and child in the United States would stamp out Smallpox in short order. It is because people have not been vaccinated that the present alarming condition exists. Be vaccinated and do your part to stamp out Smallpox.

How do you stand in the matter? Before answering, read the following statistics collected by the United States Government. They will open any one's eyes to the time and situation.

	1916 cases	1920 cases
California	234	4,503
Indiana	1,158	6,775
New Jersey	9	181
Mississippi	1,401	4,148
Michigan	1,365	4,848

These States show how widespread the smallpox menace is. You live in or between some of them. Smallpox has no respect for boundary lines, state, county, or municipal. It shrinks from only one thing—VACCINATION. Vaccination is a very simple thing. Just a scratch on the arm into which a drop of vaccine is rubbed. It is perfectly harmless. This little scratch, which leaves one scar, will save you from Smallpox, which frequently disfigures the face.

So threatening has the situation been in Missouri that on December 5, 1921, the State Board of Health of Missouri adopted a resolution compelling all persons desiring to travel on trains or other public carriers to show a certificate of vaccination before purchasing tickets.

Don't let this horrible disease catch you unprepared—BE VACCINATED—and have your children vaccinated.

PRESIDENT HARDING CONGRATULATES A METROPOLITAN FAMILY

ONE bright morning a short time ago, Mrs. Domenico Zuccahea received the surprise of her life—a letter from the President of the United States. The President had noticed in the photogravure section of one of the Sunday papers, a picture of her remarkable family and felt moved to express his cordial congratulation by a little incident which had occurred in his own life. The President added:

"My mother bore eight children and raised six of them to maturity. One afternoon, shortly before her death, we were all at my home holding a family reunion and she spoke of having borne eight children and said, with an affection most appealing to me, that she had been happy to bear eight children and, if she had her life to live over, she would have no desire to change it except to bear eight more. I thought it was a beautiful thing for her to say and the recollection of it inspired me to write my very cordial congratulations to you and add thereto my best wishes.

"Very truly yours,
"WARREN G. HARDING."

This gracious letter from the White House made the lady and her husband very happy and their children very proud. The photograph here reproduced, shows the whole family—the parents seated in the middle surrounded by their sixteen sturdy sons and daughters, ranging in age from the baby on the father's left knee to a young man of twenty-two—all insured in the Metropolitan family.

MADE A MAN OF HIM.

IN a small town in the Middle West, a young, irresponsible chap, who did not seem to value the duties of a father or of a husband, met with a serious accident after the birth of the first baby. The Metropolitan Nurse took care of the family and won their friendship and esteem, later finding a job for the man. Then two more babies came. The Company's Supervisor of Nursing met the man at his place of employment. He said, "I feel I want to tell you what this Nurse has meant to me and my family. Tell that Dr. Frankel of yours that she has been such a help to us," and then from a pocket he took pictures of his three babies and showed them proudly to her.

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Vaccination in the Philippines Still Effective

VICTOR G. HEISER, M.D., and
CHARLES N. LEACH, M.D.

Menace of the Unvaccinated

VICTOR G. HEISER, M.D.

Press of
American Medical Association
Five Hundred and Thirty-Five North Dearborn Street
CHICAGO

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Vaccination or Smallpox—Which?*

SMALLPOX has a Goddess in India. India is full of shrines to the demon smallpox. India knows smallpox to the limit.

In the Near East is the Peninsula of Arabia, isolated, remote, untouched by modern ideas, unvaccinated of course. In that vast territory with its millions of inhabitants, from 50 to 75 per cent. of all children born die of smallpox.

General Allenby takes Jerusalem. The very next day he begins to vaccinate its inhabitants—smallpox vanishes—while in Trans-Jordania it pockmarks, blinds, maims and kills as before.

The draft act of 1917 called to the colors millions of men from every section and every class, the clean and the filthy, the educated and the ignorant, the vaccinated and the unvaccinated. I ask the Antivaccinationists to point out to me a single previous assemblage of many persons closely associated in camps, transports, and in the field without an outbreak, a devouring scourge rather, of smallpox and its accompaniments. What happened to our boys? Every one was vaccinated as soon as possible. Four million one hundred and twenty-eight thousand in all, as this letter from the Surgeon-General's Office shows. How many cases of smallpox were reported in that great army in 1917, 1918 and

*Parts of the address delivered by Dr. S. B. Woodward before the Committee on Public Health of the Massachusetts Legislature, at a hearing held Feb. 6, 1924, in support of House Bill 414.

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SMALLPOX

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SMALLPOX

A PREVENTABLE DISEASE

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New York City

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VACCINATION IS A PROTECTION AGAINST SMALLPOX

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Reprinted From The Survey For
January 15, 1925

PEOPLE who are planning a trip abroad often debate the wisdom of vaccination or revaccination before leaving these sheltered and sanitary shores. Surprising, however, is the news of smallpox brought forward in a recent bulletin of the League of Nations. In 1923 the United States stood third in the number of cases of smallpox reported by some fifty-odd countries of Europe, Asia, Africa and other parts of the world. It was surpassed only by India and Russia. Next higher after its 29,968 cases come England and Wales with a total of 2,485. The whole group of countries of northern Europe—Norway, Sweden, Denmark (these three with none at all), the Netherlands, Finland, Germany, Esthonia, Latvia, Lithuania and Belgium—reported only 131 cases of smallpox in an aggregate population equal to that of the United States.

Within our own territory the differences are equally striking. Massachusetts reported a case rate of 0.1 per 100,000 of population; Montana, of 110.0. Between these extremes the honors, in general, lay with the New England and north Atlantic states, the black marks with the whole northern tier of states (except Idaho) from Michigan westward and down the Pacific coast through California. The smallpox rate of California is about fourteen times that of Japan!

Obviously if smallpox occurs a thousand times more frequently in Montana than in Massachusetts, in relation to population, the contrast is more than accidental. If countries which have been swept by war and famine and disease can avoid this scourge, surely it seems unnecessary that thousands should be killed or disfigured by it in American states which are noted for their prosperity, their healthful climates, and their excellent record for health administration in other particulars. The case rate of smallpox in any community is a direct index of the degree to which universal vaccination is preached and practised. The year just ended will undoubtedly see an even higher record than that preceding—during its first six months, for which alone statistics are now available, almost as many cases of smallpox were reported as in all of 1923. With a sure means of prevention at hand, and the experience of the world to compare with our own, every case of smallpox in this country means a victory of superstition, ignorance, or carelessness.

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L'OPINION PUBLIQUE
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le 2 octobre 1925.

LA VACCINATION DES ENFANTS DES ECOLES DANS LES ETATS DE LA NOUVELLE-ANGLETERRE

Excellent et important article de la "Medical Liberty League, Inc.", de Boston, dont nous recommandons très vivement la lecture aux pères et mères de famille

Les lois de Massachusetts, Rhode Island, New Hampshire et de quelques autres Etats hors de la Nouvelle-Angleterre exigent que les enfants des écoles publiques soient vaccinés contre la vérole. La loi de Massachusetts s'applique seulement aux enfants de l'école publique, mais les lois de New Hampshire et de Rhode Island comprennent aussi bien les enfants des écoles particulières et paroissiales. Il est possible, par la loi, d'être exempté de vaccination, avec le certificat d'un médecin, mais en pratique cette exemption n'est pas facile à obtenir.

L'opposition à ces lois qui exigent la vaccination s'est élevée partout dans le monde, mais surtout aux Etats-Unis et en Angleterre. Quelques raisons pour cette opposition sont données dans l'exposé suivant, par Henry D. Nunn de Boston, conseiller général de la Ligue pour la Liberté Médicale, Inc.

L'ORIGINE DE LA VACCINATION

"La vaccination, introduite premièrement en Angleterre par le docteur Edward Jenner en 1798, consistait à inoculer aux gens, surtout aux enfants, la matière ou le pus tirés des pustules ou des plaies d'une vache qui avait en ce moment-là une maladie de vaches qu'on appelle la vaccine. Le docteur Jenner et ses disciples déclarèrent qu'une vaccination protégerait pendant toute une vie de la vérole. Maintenant on prétend que cette protection ne dure que "quelques" années, peut-être sept ans ou cinq ans, même trois ans.

"Le mot latin duquel vient le mot familier "vaccination" fut dérivé de "vacca", signifiant une vache. Le virus vaccin alors veut dire simplement le poison d'une vache.

"Bientôt il devint l'habitude, après avoir inoculé à une personne la vaccine directement, de prendre des bras de cette personne le pus pour en inoculer à d'autres et ainsi de suite. On appelait cette méthode la vaccination "bras-à-bras". Tant de maladies graves se développaient en même temps que la vaccination par cette méthode qu'il fallait l'abandonner. A présent on [illegible]

les que: "Est-il prudent et convenable de forcer par la loi à être vaccinés tous les enfants des écoles publiques qui ne procurent pas une exemption?" "Est-ce que le danger de la vérole dans ces jours-ci et dans cette communauté suffit pour justifier une telle violation de la liberté des particuliers et l'écartement de l'autorité des parents?" "Est-ce que la pratique de la vaccination est assez sûre et assez certaine de protection pour en autoriser la contrainte?"

N'importe quel homme est bien capable de juger si c'est vrai ou non que la vérole soit une menace au public assez grande et assez proche pour justifier l'inoculation à chaque enfant du poison d'un animal. Mais si ce n'était pas vrai, tout de même, chaque homme, sans savoir rien du tout de la médecin, comprendrait s'il prenait le temps d'en réfléchir, que si la loi exige que les enfants soient vaccinés, la loi devrait déterminer exactement l'opération. Il comprendrait que la loi ne devrait pas exiger une opération qu'elle ne détermine pas. Néanmoins, il n'y a pas d'opération de chirurgie qui ait subi plus de changements radicaux que la vaccination depuis qu'on a établi ces lois dans la Nouvelle-Angleterre. Les méthodes de vaccination généralement pratiquées il y a dix, vingt, quarante ans, sont maintenant condamnées comme dangereuses et surannées.

IMPOSSIBLE D'ANALYSER

"Mais même si on ne regarde pas la manière dont on opère, il s'agit toujours de savoir quels sont les antécédents d'un certain échantillon du virus vaccin. Le docteur Milton J. Rosenau, dans son livre "La Médicine et la Hygiène Préservatives", aussi bien que tous les autres autorités nous disent que ni le germe de vaccine ni le germe de vérole n'a jamais été isolé. Il est, donc, impossible par toute méthode d'analyse de déterminer si quelque échantillon spécifique du virus vaccin a son origine dans la vaccine, dans la vérole ou dans une autre maladie pustuleuse. Parke, Davis & Co., de Detroit,

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NO DIPHTHERIA IN NEW YORK STATE IN 1930

Presented at the Annual Meeting
of the State Committee on Public Health
of the State Charities Aid Association
May 5, 1925.

By

LEE K. FRANKEL, PH.D.
Second Vice-President
Metropolitan Life Insurance Company

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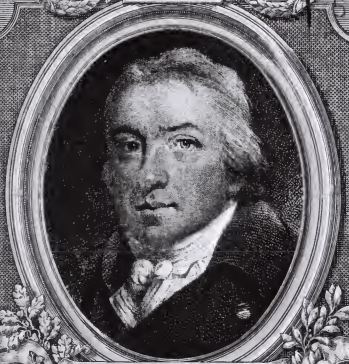
HEALTH HEROES



EDWARD JENNER

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VACCINATION AND SYPHILIS

Vaccination Means Syphilization, and Compulsory Vaccination Means Syphilization by Law.

Vaccination Indicted By Medical Authorities

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(From The Quest, July, 1926)

To compare vaccination with syphilis, is like waving a very red rag to a Spanish bull, as far as the vaccinationists are concerned. From Matthias Nicoll, Junior, M.D., to Doctor Keane of Philadelphia, and from the two-by-four county medical organization to the big national menagerie, they are all up on their hind legs yelling "outrage" over the possible connection of vaccination and that most dreaded of all diseases —"SYPHILIS."

When the anti-vaccinationists put out their definition of vaccination as:

> *"The inoculation of a healthy person, with putrid pus, taken from a festering sore, on a diseased animal, and of a distinct syphilitic character,"*

there was a great cry raised in the house of the vaccination god, Rimmon. Some said it was a "lie." Some said it was a libel on Jenner and his "great discovery." Others challenged the proofs. The latter were the more reasonable, and are entitled to the evidence in the case and the charge. Anti-Vaccinationists should not side-step their own issue. And pro-vaccinationists must not squeal or ask for a suspended sentence if convicted on self-invited charges. We are not going to express our own opinion on the relationship of vaccination and syphilis, but will permit medical men and medical science to speak in open court on this matter.

Dr. W. R. Hadwen, M.D., M.R.C.S., L.R.C.P., J.P., in an address delivered in Town Hall, New York City, in May, 1926, declared: "Vaccination produces a condition analagous to Syphilis."

Dr. A. S. Woodwark, C.M.G., C.B.E., M.D., F.R.C.P., England, in his "Manual of Medicine," a book in current use among students of medicine says that "Impetigo contagiosa, syphilis, tetanus, cellulitis, erysipelas, pyoemia, gangrene or boils," may occur from impure or mixed inoculation at the time of vaccination, or later.

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SCHICK TEST AND TOXIN-ANTITOXIN PROPAGANDA A WRONG USE OF PUBLIC FUNDS

Documentary Proof That Procedure Does Not Prevent Diphtheria but That it Tends to Cause it; That it Endangers the Health and Lives of Hundreds of Thousands of Children; That the Treatment Has Been Placed in a False Light Before the Public by Means of Misleading Propaganda at Public Expense and that Such Propaganda is a Menace to Public Welfare.

By H. B. Anderson, Secretary
Citizens Medical Reference Bureau

Published by
CITIZENS MEDICAL REFERENCE BUREAU
226 West 47th Street
New York
1928

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QUESTIONS FOR VACCINATORS.

Reprinted from The QUEST, January, 1927.

Put these questions to the advocates of vaccination, and insist on an answer before you allow your child to be vaccinated,

1. Does the vaccine used in vaccination against smallpox, contain a distinct, specific, micro-organism, which, when introduced by any method into the human system, establish permanent or limited immunity against smallpox?

2. Has this specific micro-organism ever been detected through the medium of the microscope or any other scientific apparatus known to scientific research or used in the laboratory?

3. If the vaccine used against smallpox does contain a specific immunizing agency capable of giving immunity against smallpox, has it ever been artificially cultivated? If not, why not?

4. If this specific micro-organism with immunizing qualities against smallpox does exist, and its existence is scientifically demonstrable, can it be separated or isolated from other micro-organisms such as tetanus, syphilis, tuberculosis and other diseases produced by micro-organisms?

5. If the immunizing micro-organism against smallpox cannot be separated from other micro-organisms in the process of, or previous to the operation of vaccination, is not vaccination a risky operation, and liable to communicate other diseases far more dangerous and undesirable?

6. Are scientific authorities in general, and medical authorities in particular, a unit in favor of vaccination against smallpox?

7. Is it a fact that men of standing in the medical profession have declared that syphilis, leprosy, tetanus, tuberculosis. cancer and numerous exzematous diseases, even of a distinct epidemic character, have followed vaccination against smallpox?

8. Is it a fact that death frequently occurs as a result of vaccination against smallpox?

9. Is it a fact that the seed virus used by manufacturers of smallpox vaccine is secured from smallpox patients, direct? Are not laboratories and users of vaccine lying about the business when they deny this to be true?

10. Is vaccination against smallpox the introduction of modified or attenuated smallpox, prepared for introduction into the human system by being passed through the body of a calf, and taken from festering sores on the abdomen of the calf?

11. Does Glycerinization of the pus taken from the calf's abdomen make it a fit product to enter the human system?

12. Will the manufacturers and users of vaccine against smallpox, make oath and swear, that vaccine does not contain smallpox, that it has not been taken originally from a smallpox patient, and that when introduced into the human system, will not produce anything beyond immunity to smallpox?

13. Will vaccinators swear that vaccination will confer immunity against smallpox?

14. Will vaccinators assume all risk for vaccination. and indemnify the vaccinated and their parents against any and all serious results that may follow?

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NEBRASKA CHAPTER
AMERICAN MEDICAL LIBERTY LEAGUE
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SMALLPOX

A PREVENTABLE DISEASE

Specially marked copy with notations.

for Dr W. W. Keen. P.D.Blue

New Orleans, La.
January 26, 1927

PUBLISHED BY THE
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PREVENTING DIPHTHERIA

IN

NEW YORK STATE

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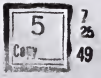

IN THE MATTER
OF

Revision of Health Laws of Pennsylvania

Recommendations
OF
PITTSBURGH HEALTH CLUB
AND
Brief of Argument.

To HON. WILLIAM C. FREEMAN,
HON. JAMES J. HEFFERMAN,
DR. ROBERT W. BERGER,
MRS. FANNIE S. LONG,
DR. R. S. MARSHALL,
MRS. LUCY K. MILLER,
DR. ROSS V. PATTERSON,
HON. CHARLES Y. AUDENRIED,
DR. R. F. SHAULIS,
DR. H. M. VASTINE,
RT. REV. JOHN C. WARD, and
DR. BLANCHE R. YOUNG,
Members of the "Commission to Study the Laws Relating to the Healing Art."

Sitting in Philadelpha, Bellevue-Stratford,
November 16th and 17th, 1927.

ANDREW G. SMITH,
Attorney for Petitioner.
1505 Berger Building,
Pittsburgh, Pa.

SMITH BROS. CO. INC., LAW PRINTERS, 208-212 GRANT ST., PITTSBURGH, PA.

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A NEW DANGER OF VACCINATION

ON 3rd August, 1928, Mr. Thomas Groves, M.P., ascertained from the Minister of Health that inquiries had been and were being made by Medical Officers of his Department as to the circumstances associated with the illness of Kathleen Merrison, of Wereham, Norfolk, who was taken ill on the eleventh day after vaccination and died on 6th July of "encephalitis" at Addenbrooke's Hospital, Cambridge; and of Doris Griggs, another child in the same district, who died of "encephalitis" at the same hospital on 9th July, fourteen days after vaccination. Mr. Chamberlain stated that two other similar cases had occurred in Wereham. In reference to these injuries and deaths from vaccination, the following paragraph is extracted from the *Daily Mail* for 6th August, 1928:—

MYSTERY ILLNESS.

DOCTORS PUZZLED BY DEATHS OF CHILDREN.

FROM OUR SPECIAL CORRESPONDENT.

DOWNHAM MARKET, NORFOLK,
Monday.

Ministry of Health experts and local doctors are much concerned by the mysterious illness which, as reported in yesterday's *Daily Mail*, recently attacked six children in this pretty part of Norfolk and caused the death of three. The symptoms were those of encephalitis lethargica (sleepy sickness).

I am informed that at the hospital at Cambridge to which two of the children who died were taken the sickness was diagnosed as acute encephalitis (inflammation of the brain substance). Post-mortem examination, however, gave the doctors no clue to the actual cause of death. Ministry of Health experts are conducting special inquiries.

Dr. G. F. Cross, Medical Officer of Health of Downham Urban and Rural District Council, told me to-day that he was puzzled by the illness. He added:—

> I do not think it was due to the lymph used in vaccination but to some other cause. Five of the six children affected were vaccinated only a few days before they were taken ill, but one of the three who died had not been vaccinated at all. As a result of the smallpox scare in the neighbourhood some hundreds of children and adults were vaccinated at the time, and there was not a bad arm among them.
>
> The six children who were seized with the mystery illness came from three places some miles apart, Wereham, Hilgay, and Ryston. Inquiries show that the five who were vaccinated were all done with different lymphs.

We are informed that the fatal case at Ryston, dragged in in an endeavour to save vaccination from reproach, differed in symptoms and course of the disease from the five cases of encephalitis after vaccination.

The death certificate in the case of Kathleen Merrison, aged ten years, states that death was due to (1) (*a*) Encephalitis; (2) Recent vaccination; and this was certified by Sidney W. Savage, L.R.C.P. In the case of Doris Mabel Griggs, aged nine years, death was certified by Dr. Savage as due to (1) (*a*) Encephalitis; (2) Vaccination. Dr. Cross, in his state-

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had paid his medical and hospital bills. But when Dr. Gallaway presented her bill, the Company refused to pay it, giving as their reason that they did not recognize a Chiropractor as being a doctor.

According to the laws of Oklahoma, a chiropractor is as much of a doctor as a "physician" is a doctor. In 1921 a law was "enacted by the People of the State of Oklahoma," Section 5 of which, in part, reads as follows:

Chiropractic practitioners hereunder shall be bound by all the health police regulations of this State that shall apply to them, and shall be qualified to sign death certificates, AND ALL OTHER CERTIFICATES, including those relating to public health, THE SAME AS MEDICAL PRACTITIONERS, AND WITH LIKE EFFECT. (Caps are ours).

The medical-trust ridden Fidelity Union Casualty Co. may not "recognize a Chiropractor as being a doctor," but that does not change the facts in the case. Dr. Gallaway knew that the law regarded her as being a "doctor" on equal terms and footing with the peddlers of pills, powders, and pus. So she turned her account over to the Oklahoma Industrial Commission, which Commission considered the bill as regular, just, and legal, and ordered it paid.

Again the Insurance Co. refused to pay, and called for a hearing to determine their liability and reasonableness of the bill. The hearing was had and held in due course at Sayre, Okla., on April 5, 1927. The Respondent failed to appear.

On Aug. 6, the Oklahoma Industrial Commission, in regular session, again ordered the account paid. Again the Insurance Co. demurred, and still another order was issued to them, directing payment of the bill. They finally paid it in October, 1927—after 20 months of waiting on the part of Dr. Gallaway, merely **because she is a Chiropractor instead of a dispenser of drugs, serums, and filth.**

The moral which the reader should gather from this story is, NO MATTER WHAT YOUR AILMENT MAY BE, CALL A DOCTOR OF CHIROPRACTIC FIRST!

Free Medical Propaganda

By DR. R. G. LEMONT.

In a two-column box in the center of the "Local News and Features" page of the daily Oklahoma City Times of Nov. 4, 1927, the decrepit and declining institution that sails under the false flag of "medical science" gets the usual free write-up. The article closes in this boosting, boasting language:

"Typhoid, scarlet fever, diphtheria, and smallpox are absolutely preventable now, according to reputable physicians. Serum for scarlet fever is the latest to be developed.

"Most bad colds can be prevented in children as well as in adults, but few people seem to know about this."

The gist of the article is to explain how easy it is to prevent an "attack" of diphtheria by the use of "diphtheria serum." The article, in part, says:

"Medical science in the past 25 years has developed a few curative medicines, and numerous preventive serums have been developed, until now it is considered almost criminal if a child has at least four of the more common diseases."

The "four of the more common diseases" have been noticed above. Diphtheria is one of them; and in the Oct. 31, 1927, issue of the same paper appears this:

BOY'S DEATH SIXTH FROM DIPHTHERIA

With the death of Harold Bryan, 8 years old, 919 West Chickasaw avenue, the toll from diphtheria during October reached six, according to records of the city health department.

Ten new cases have been reported since October 26. Three of these were reported Monday. There are ten old cases still under quarantine. Seven diphtheria carriers also are quarantined, making a total of twenty-seven diphtheria and diphtheria carrier cases in the city.

Dr. W. H. Miles, city health director, urged again that parents take their children to their family physician for the toxin-anti-toxin treatment. Diphtheria can be stamped out, he said, but it is up to parents to give their children proper treatment to prevent the disease.

The medical profession claim that "diphtheria can be stamped out" by injecting into the blood-stream the great preventative known as toxin-anti-toxin. That is the wonderful substance that "immunizes" one against diphtheria, according to the claims of the medical machine. We are going to tell you what this substance is, and how it is made, then let you judge whether by its use "diphtheria can be stamped out."

Lora C. W. Little, writing in National Health, observes:

"We also witnessed and heard of anti-toxin production; saw the stable full of big horses, some weakly tottering and evidently approaching their end. They (the manufacturers of the substance) purchase broken-down draft-horses; the larger the better, as they can furnish more blood than smaller animals.

"We saw one of the noble creatures in a room waiting to be bled, and plainly trembling in anticipation. It had been drenched with an antiseptic bath. The operator plunged a sharp steel instrument into the jugular vein, and the horse jumped and cringed. A tube was placed over the wound and the blood flowed thru it into a glass jar.

"The horses are first infected repeatedly with diphtheria culture. They die in time from the abuse. The whole place became eloquent of torture; disease, disease everywhere; the silent suffering of the patient brutes; the shallow callous wretches who were tormenting them; the doomed victims (children) over the country to be tainted and killed as the result of these superstitious cruelties."

Thousands of children are killed outright, or crippled for life, by the use of these deadly, filthy serums that "immunize" one against disease. During the fall of 1919, in Dallas, Texas, 10 children were killed outright, and 69 others were injured for life, by having injected into their bodies the poisonous serum which Dr. Miles says would stamp out diphtheria if parents would give their children "proper treatment to prevent the disease."

What was the cause given for the death of these Dallas children? "Acute myocarditis" (inflammation of the muscular walls of the heart) reads most of the death certificates. The truth must be suppressed; people must be kept in ignorance, for to know the truth means to be set free from the bondage of medical superstition and plunder. If people knew the truth about the practice of medicine, that institution would disappear as quickly as mist dis-

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Schick Testing and Immunisation in Edinburgh

Criticism by the Council of

THE NATIONAL ANTI-VACCINATION LEAGUE

In " The Medical Officer " of the 3rd of December last, Dr. William Robertson, Medical Officer of Health, Edinburgh, published some particulars in regard to his experiences with the Schick Test and immunisation against Diphtheria in Edinburgh. The article was composed of answers to questions addressed to him by correspondents, which he thought might also prove helpful to those who were hesitating yet anxious to embark on a scheme of protective operations.

We do not happen to fall into the latter category but we fail to see that the defenders of the Schick test and its sequential inoculations have established their case. In particular we would like to know what Dr. Robertson has to say in regard to the following very important points.

Are Children Pre-Destined to an Attack of Diphtheria?

The advocacy of the Schick test etc., involves the conclusion that some children are pre-destined to an attack of diphtheria. And yet the number of persons dying from that disease to-day is only one-quarter of the death-rate of 60 years ago. In the case of Scarlet Fever, the decline has been even greater. Why, therefore, should it be assumed that the causes which have produced these satisfactory results are no longer to exercise their beneficent effects?

On page 22 of Dr. Forbes's recent report to the Medical Research Council there is a table which shows that during the 15 years 1911-25, Portsmouth, Edinburgh, Bristol and London, respectively, had the heaviest diphtheria death-rates in Great Britain, and that Leeds, Bradford, Newcastle and Sheffield had the least death-rates. Edinburgh's death-rate (0.174 per 1,000) was exactly three times that of Sheffield (0.058 per 1,000). Why? The children of Edinburgh are surely not pre-destined to suffer in this greater degree. There must be some more rational explanation. Has Dr. Robertson endeavoured to find it? If not, why not?

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THE DANGER OF VACCINATION.

A DOCTOR'S LETTER.

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Reprinted from "The British Medical Journal," June 8, 1929.

SIR,—It should be widely known among general practitioners that cases of post-vaccinal encephalitis are occurring at the present time in England.

Among the few known points in the etiology of this disease are :—(1) It appears to be confined to primary vaccinations of children of school age; (2) it cannot be connected with the use of any particular brand of vaccine lymph. Further, the mortality rate is high. On the other hand, the latest mortality rate of the prevailing epidemic of smallpox is very low, being 0.25 per cent.

There is therefore a heavy responsibility on medical practitioners in deciding at this time whether to proceed with the primary vaccination of children of school age. But there is nothing to suggest that there is any undue risk in proceeding with revaccination, or with the vaccination of infants and adults.—I am, etc.,

PERCY ROSE.

London, E.16, June 3rd.

Note on the above letter by the Secretary of the National Anti-Vaccination League.

Post-vaccinal encephalitis is not confined to children of school age. The table on page 160 of the Report of the Rolleston Vaccination Committee gives the age-grouping of the 93 cases of that disease into which the Committee inquired occurring between November, 1922, and October, 1927. Nine cases were in the age group 0–1, three were a year old, and one was three years old. Nor were adults exempt. Nine cases were over twenty years of age.

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Reprinted from "THE STAR," April 19th, 1929.

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The French Farce.

By A. G. GARDINER.

I CONGRATULATE myself that neither business nor pleasure calls me to France just now. It is sixty years and more since I was vaccinated, and though, if real occasion arose, I should submit to the advice of my medical adviser, I should much resent the right of the French to compel me to be vaccinated because they have got into a silly panic. No one questions the liberty of our Gallic friends to put us in quarantine if they think fit, but they must not complain if we think they cut rather an absurd figure in doing so. Such a drastic proceeding was surely never founded on such a trivial circumstance. The fact that a vessel has arrived here with an outbreak of smallpox aboard has alarmed no one. We have sufficient confidence in our sanitary arrangements to know that there is as little chance of a smallpox epidemic ensuing as there would be of a bubonic plague had the Tuscania brought that disease instead of smallpox. To cut us off, almost without an hour's notice, as an unclean people on this absurd ground seems like a practical joke more than an expression of real alarm.

BUT I think there is more in the matter than either a joke or a panic. France is seizing the occasion to read us a lesson on our naughtiness on the subject of vaccination. It may seem odd that the French should assume the rôle of mentor to us in health matters. The mortality tables of the two countries are a sufficient comment on that aspect of the business, and a little experience of French sanitary standards, coupled with the shocking records of the French military hospitals during the war, will save us from any necessity of blushing. The French death rate is 23 per cent: above ours, French domestic sanitation is about two centuries behind ours, and a trained nurse in France is as rare as a black swan.

BUT in spite of all this, perhaps because of all this, France has a terror of smallpox and regards our laxity in regard to vaccination as a menace to herself. That laxity has sprung, not so much from disbelief in the value of vaccination, as from the security which our higher standards of sanitation has secured to us. In the last 50 years the mortality from smallpox in these islands has shrunk almost to vanishing point. In the decade 1871-80 the deaths numbered 5,742 annually; in the decade 1911-20 they had fallen to 14 annually; in the last five years they have averaged 18 a year. There are twice as many deaths *every day of the year* from influenza as there are in a whole year from smallpox, and thrice as many every day from tuberculosis.

IS there any other country in the world which can claim to have made so complete a conquest over the disease as this country has done? Certainly France cannot. If she could, she would not, of course, have been seized with this grotesque panic. It is because her low standards of public health make her so vulnerable that she attaches so much importance to the prophylactic of vaccination. Whether the immunity which our higher standards have given us has tended to make us think too lightly of vaccination is a subject of controversy on which I offer no opinion, but it is certain that while the disease remains so completely under control there will be no change in the public mind on the subject. People do not get vaccinated for the pleasure of being vaccinated, but to protect themselves against a real danger, and if the danger has ceased to be real the prophylactic will increasingly cease to be employed, except in the rare cases of specific attack.

IN any case, there is something quaint in the idea of a country, whose indifference to decent standards of public health has left it lagging so far behind us, lecturing us on the subject of our misconduct, and putting us in quarantine as a punishment for not being sufficiently severe in our enforcement of vaccination. It is not the first time that France has expressed her dissatisfaction with us on this ground. She has even gone so far as to threaten to bring us before the League of Nations as a menace to the public health of Europe. It would be a great day if that happened, and I hope we should not enter the plea which France has entered in the case of legalised prostitution. In that case she has argued that the *maison tolerée* is a purely domestic affair outside the authority of the League. The argument is weak, for the notorious fact is that the legalised prostitution of France makes that country a centre of the traffic in women which is world-wide and which therefore is a proper subject for the League. The French are "realists" in the cant sense of that much-abused word, and would doubtless say that smallpox is one thing and morality is quite another.

HOWEVER that may be, I would not put any obstacle in the way of their indictment of us on the subject of our attitude to smallpox. That indictment would lead to such a revelation of the comparative respect for life and public health in the two countries as should produce a very wholesome shame in France, and a suspicion that even on economic grounds it does not pay to have a high death rate and a low expenditure on drainage, hospitals and the common needs of life. Meanwhile, those of us who happily have no occasion to visit French soil can enjoy the comedy of being put in quarantine by our surprising neighbour.

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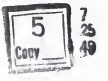
SMALLPOX *and* VACCINATION



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